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7590

10/08/2004

James H Morris
Wolf Greenfield & Sacks PC
600 Atlantic Avenue
Boston, MA 02210

01/11/2005 SMINASS2 00000023 09650033

01 FC:1501 1400.00 DP
02 FC:8001 30.00 DP

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<u>Gail Driscoll</u>	(Depositor's name)
<u>Gail Driscoll</u>	(Signature)
<u>1-7-05</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/650,033	08/28/2000	Richard Shann	S1022/8522	7631

TITLE OF INVENTION: RELOCATION FORMAT FOR LINKING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	01/10/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, THE T	2126	709-331000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lisa K. Jorgenson
2 William R. McClellan
3 Wolf, Greenfield & Sacks,
P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

STMicroelectronics Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Almondsbury Bristol, United Kingdom

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 2372825 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature William R. McClellanDate DEC. 6, 2004Typed or printed name William R. McClellanRegistration No. 29,409

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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ATTORNEY'S DOCKET NO.: S1022.80522US00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richard Shann
Serial No: 09/650,033
Filed: August 28, 2000
For: A RELOCATION FORMAT FOR LINKING

Examiner: The T. Ho
Art Unit: 2126

Confirmation. No.: 7631

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is/are the following document(s):

- ☒ Issue Fee Transmittal
- ☒ Return Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned collect at (617)720-3500, Boston, Massachusetts.

A check in the amount of \$1,430.00 is enclosed to cover the \$1,400.00 issue fee and \$30.00 for soft copies. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

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I hereby certify that this document is being placed in the United States mail with first-class postage attached, addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the 7th day of January, 2005.

Attorney Docket No.: S1022.80522US00
X01/08/04

Respectfully submitted,

Richard Shann, Applicant

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